PART B - FEE(S) TRANSMITTAL

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUL FEE

Commissioner for Pate
P.O. Box 1450

Alexandria, Virginia 2:

Commissioner for Patents

Alexandria, Virginia 22313-1450

or <u>Fax</u> (571)-273-2885

This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

indicated unless correct maintenance fee notifica	ted below or directed ot	herwise in Block 1, by	(a) specifying a new corres	spondence addres	s; and/or	(b) indicating a sepa	rate "FEE ADDRESS" for	
CURRENT CORRESPOND	Fee	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.						
PALMER & D KATHLEEN M	OODGE, LLP I. WILLIAMS TON AVENUE		Stat add:	reby certify that t es Postal Service ressed to the Ma	this Fee(s with suff il Stop	of Mailing or Transity) Transmittal is being dicient postage for firs (SSUE FEE address 1) 273-2885, on the day	deposited with the United t class mail in an envelope above, or being facsimile	
BOSTON, MA		Alyson J. I	(Depositor's name)					
11/20/2007 SFELEKE2 00000017 041105 10811198 01 FC:2501 720.00 DA				linon	(Signature)			
02 FC:1504		November 16, 2007						
APPLICATION NO.	30.00 DA		FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.			CONFIRMATION NO.	
10/811,198 TILE OF INVENTION	03/26/2004 I: P2Y4 ANTIBODIES	Didier Communi	-		9409/2113B	2940		
+								
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE		TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES	\$700	\$300	\$0		\$1000	11/23/2007	
EXAM	EXAMINER ART UNIT			S-SUBCLASS				
LI, RUI	XIANG	530-388200	530-388200					
Change of correspondence address or indication of "Fee Address" (37 FR 1.363). Change of correspondence address or indication of "Fee Address" (37 (1) the names of up to 3 registered patent attorneys 1 Edwards Angell Palmer & I							ngell Palmer & Dodge	
Address form PTO/SE	ondence address (or Cha 3/122) attached.	nge of Correspondence	or agents OR, alternatively, (2) the name of a single firm (having as a member a 2 Kathleen Williams					
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. Amy DeCloux					
			THE PATENT (print or typ	•	(**************************************	
PLEASE NOTE: Unle recordation as set forth	ess an assignee is identi h in 37 CFR 3.11. Comp	fied below, no assignee pletion of this form is NO	data will appear on the pa T a substitute for filing an a	itent. If an assigi	nee is ide	entified below, the do	cument has been filed for	
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
Furacaroon			Del ei					
Euroscreen S.a. Belgium ease check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government								
			•		 			
a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) I ssue Fee						nown above)		
Publication Fee (No small entity discount permitted)				edit card. Form PTO-2038 is attached.				
Advance Order - # of Copies 10 The Director is hereby authorized to charge the required fee(s), any deficiency, or credit overpayment, to Deposit Account Number 04=1105 (enclose an extra copy of this						iciency, or credit any extra copy of this form).		
	us (from status indicated			•				
	SMALL ENTITY statu		b. Applicant is no long					
terest as shown by the re	ecords of the United Stat	es Patent and Trademark	d from anyone other than the Office.	e applicant; a reg	istered at	torney or agent; or the	assignee or other party in	
Authorized Signature Orm Dellow 54849 for				Date November 16, 2007				
Typed or printed name	Kathleen Willia		Registration N	No. 34,	380			
is collection of informa application. Confident	ation is required by 37 Cliality is governed by 35	FR 1.311. The informatio U.S.C. 122 and 37 CFR	n is required to obtain or re	tain a benefit by t mated to take 12	the public minutes t	which is to file (and o complete, including	by the USPTO to process) gathering, preparing, and	

submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PTO/SB/17 (10-07)
Approved for use through 06/30/2010. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

APENT	Complete if Known								
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Application Number 10/811,198-Conf. #2940					
FEE		Filing Date		March 26, 2004					
For FY 2008				First Named In	ventor	Didier Communi			
	FUI FI Z	JUO		Examiner Name	•	R. Li			
X Applicant cla	nims small entity sta	tus. See 37 CFR 1.27		Art Unit 1646					
TOTAL AMOUNT O	PAYMENT	(\$) 1,050.00		Attomey Docket No. 2113B(209409)					
METHOD OF PA	AYMENT (check	all that apply)							
Check									
X Deposit Accou	int Deposit Account	Number: 04-1	105	Deposi	t Account Nam	e: Edwards An	gell Palme	r & Dodge	
For the abo	ove-identified dep	osit account, the Dire	ector is	hereby authoriz	ed to: (che	ck all that apply))		
x Char	ge fee(s) indicate	d below		Charg	ge fee(s) in	dicated below, e	xcept for ti	ne filing fee	
X Char	ge any additional) under 37 CFR 1	fee(s) or underpaym .16 and 1.17	ents o	f x Credi	t any overp	payments			
FEE CALCULA	TION								
1. BASIC FILING,	SEARCH, AND E	XAMINATION FEES	3						
	FI	LING FEES	SE	ARCH FEES		NATION FEES	}	:	
Application Type	Fee (\$	Small Entity Fee (\$)	Fee (\$	Small Entity) Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees F	Paid (\$)	
Utility	310		510	255	210	105	1,0001	αια (ψ/	
Design	210	105	100	50	130	65			
Plant	210	105	310	155	160	80			
Reissue	310	155	510	255					
					620	310			
Provisional	210	105	0	0	0	0			
2. EXCESS CLAIM	FEES							Small Entity Fee (\$)	
	Fee Description Each claim over 20 (including Reissues) Fee (\$) 50 25								
							105		
Multiple dependen	•	admig relissaes)					370	185	
Total Claims								105	
	αια (ψ)	_			3)				
HP = highest number of total claims paid for, if greater than 20.									
Indep. Claims									
9 -9= x =									
HP = highest number of independent claims paid for, if greater than 3.									
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)									
100 = /50 = (round up to a whole number) x =									
4. OTHER FEE(S) Fees Paid (\$)									
Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 2501 Utility issue fee 720.00									
1504 Publication fee for early, voluntary, or normal 300.00 8001 Printed copy of patent w/o color 30.00									
CUDMITTED BY			-, -, ,						
SUBMITTED BY	7 1	Cucal Man	1	Registration No.	04.000	1	40.451.55		
	my De Clory			(Attorney/Agent)	34,380	Telephone	(617) 23		
Name (Print/Type) K	athleen William:	ϵ				Date I	Vovember	16 2007	

pplication No. (if known): 10/811,198

Attorney Docket No.: 2113B(209409)

Certificate of Express Mailing Under 37 CFR 1.10

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail, Airbill No. EM054398957US in an envelope addressed to:

Mail Stop Issue Fee Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

onNovember 16, 2007	
Date	
	1
	rd. Sucar
Sign	atúre
V	
Alyson .	J. Lucas
Typed or printed name of	person signing Certificate
	(617) 951-0735
Registration Number, if applicable	Telephone Number

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Fee Transmittal (1 page) x2
Part B Fee Transmittal (1 page)
Charge \$1,050.00 to deposit account 04-1105
Postcard